	ntify your case:	
United States Bankruptcy Cou	rt for the:	
Northern District of Illinois	~	
Case number (If known):	Li	
Case Humber (If known):	Chapter you are filin	ng under:
	Chapter 11	
	☐ Chapter 12 ජ Chapter 13	☐ Check if this is an
	_ onapie: 10	amended filing
		
Official Form 101		
Voluntary Pet	ition for Individua	Is Filing for Bankruptcy 12/15
The bankruptcy forms use you	and Debtor 1 to refer to a debtor 5000 to	
Debtor 2 to distinguish between same person must be Debtor 1. Be as complete and accurate as information, if more space is not (if known). Answer every quest	n them. In joint cases, one of the spouses in all of the forms. s possible. If two married people are filing seded, attach a separate shoot to this for	one. A married couple may file a bankruptcy case together—called a per from both debtors. For example, if a form asks, "Do you own a car," is needed about the spouses separately, the form uses <i>Debtor 1</i> and is must report information as <i>Debtor 1</i> and the other as <i>Debtor 2</i> . The group of the top of any additional pages, write your name and case number.
Part 1: Identify Yourself		
V	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Your full name		•
Write the name that is on your government-issued picture	Vanessa	
identification (for example,	First name	First name
your driver's license or passport).	Middle name	
Bring your picture	White	Middle name
identification to your meeting	Last name	Last name
		Last fame
with the trustee.	Cuffs (C. L. P. II)	
with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
All other names you	None	***

All other names you have used in the last 8 years	None	Suffix (Sr., Jr., II, III) First name
All other names you have used in the last 8 years	None First name Middle name	Suffix (Sr., Jr., II, III) First name Middle name
All other names you have used in the last 8 years	None First name	First name Middle name
All other names you have used in the last 8 years	None First name Middle name Last name	First name Middle name
All other names you have used in the last 8 years	None First name Middle name	First name Middle name Last Lime UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS
All other names you have used in the last 8 years Include your married or	None First name Middle name Last name	First name Middle name Last Lime Last Lime UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS HIST name MAR 17 2016
All other names you have used in the last 8 years	None First name Middle name Last name First name Middle name	First name Middle name Last Time L
All other names you have used in the last 8 years	None First name Last name First name	First name Middle name Last Time Last Tim
All other names you have used in the last 8 years	None First name Middle name Last name First name Middle name	First name Middle name Last Line UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS HIST name MAR 17 2016
All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of	None First name Middle name Last name First name Last name Last name	First name Middle name Last Line Last Lin
All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security	None First name Middle name Last name Middle name Last name XXX - XX - 5 0 0 0	First name Middle name Last Time Last Time UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS MAR 17 2016 Middle name JEPPREY P. ALLSTEADT, CLERK XXX - XX -
All other names you have used in the last 8 years	None First name Middle name Last name First name Last name Last name	First name Middle name Last The Last

3.

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Debtor 1	Vanessa First Name Middle	White			Case number (# known)
	First Name Middle	Name Last Name			
		About Debtor 1:			About Debtor 2 (Spouse Only in a Joint Case):
and E Ident (EIN)	business names Employer ification Numbers you have used in	I have not used any bus	iness names	or EINs.	☐ I have not used any business names or EINs.
	ıst 8 years	Business name			Business name
Includ doing	e trade names and business as names	Business name			
		business name			Business name
		EIN	- distribution provinces		EIN
		EIN			EIN
5. Where	e you live				If Debtor 2 lives at a different address:
		18009 Ravisole Terran	ice		
		Number Street		***	Number Street
			····		
		Country Club Hills City	IL State	60478 ZIP Code	City State 7ID Code
		Cook	Olote	Zir Gdde	City State ZIP Code
		County			County
		If your mailing address is d above, fill it in here. Note th any notices to you at this mai	at the court w	the one rill send	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Same			
		Number Street			Number Street
		P.O. Box		1	P.O. Box
		City	State	ZIP Code	City State ZIP Code
this dis	ou are choosing strict to file for	Check one:			Check one:
bankruptcy		Over the last 180 days bef I have lived in this district I other district.	ore filing this onger than in	petition, any	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Exp (See 28 U.S.C. § 1408.)	olain.		I have another reason. Explain. (See 28 U.S.C. § 1408.)

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D	ebtor 1	Vanessa First Name Middle N		hite	TUD.			Case number (if known)			
	art 2:											
	a	Tell the Court Abo	out Your	Bankrı	ptcy Cas	е						
7.	Bankr	napter of the uptcy Code you	Check for Bar	one. (Fo	or a brief des (Form 2010	scription of eac)). Also, go to t	h, see <i>No</i> he top of	tice Required by 1 page 1 and check	1 U.S.C. § 342(b) for Individuals Filing the appropriate box			
	are ch under	oosing to file		for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. Chapter 7								
			☐ Ch	apter 1	1							
			Chi	apter 12	2							
			☑ Ch	apter 13	3							
8.	How y	ou will pay the fee	you sub with I ne App	rself, yemitting a pre- ed to polication quest to aw, a juthan 1 the fee	ou more do ou may pay your paym printed add ay the fee for Individe that my fee adge may, 50% of the in installm	etails about ry with cash, clent on your bardess. in installmetuals to Pay 7 be waived (but is not requerts). If you determine the property of the property	ents. If your may uired to, rty line thoose the	may pay. Typica check, or money our attorney may but choose this of Fee in Installment request this opwaive your fee, nat applies to you his option, you mis option.	neck with the clerk's office in your ally, if you are paying the fee y order. If your attorney is a pay with a credit card or check option, sign and attach the ents (Official Form 103A). It ion only if you are filing for Chapter 7, and may do so only if your income is aur family size and you are unable to nust fill out the Application to Have the with your petition.			
9.	Have yo	ou filed for ptcy within the	□ No									
	last 8 y	ears?	Yes.	District	Northern	of Illinois	When	07/28/2014 MM / DD / YYYY	Case number <u>14-27470</u>			
				District			When	MM / DD / YYYY	Case number			
				District			When					
								MM / DD / YYYY	Odoc Milliper			
		bankruptcy	No No									
	filed by	ending or being a spouse who is	☐ Yes.	Debtor					Relationship to you			
	you, or	g this case with by a business or by an ?		District	***************************************	***************************************	When		Case number, if known			
				Debtor					Relationship to you			
				District			When	MM / DD / YYYY	Case number, if known			
1. [Do you i esidend	ent your ee?	Yes.	residen	or landlord o		ction judgr	ment against you a	and do you want to stay in your			
					Go to line 1:							
				✓ Yes this	. Fill out <i>Initi</i> bankmintev i	ial Statement A	bout an E	viction Judgment	Against You (Form 101A) and file it with			

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Debtor 1 Vanessa First Name Middle N		Vhite Last Name		Case	number (# know/	1)	
Part 3: Report About Any	Busines	ses You Own as a S	iale Propri	ator			
			ole Propri	etoi			
Are you a sole proprietor of any full- or part-time	2 No.	Go to Part 4.					
business?	Yes	s. Name and location of I	ousiness				
A sole proprietorship is a business you operate as an							
individual, and is not a separate legal entity such as		Name of business, if any				And the second s	
a corporation, partnership, or		Number Street	·····				
LLC. If you have more than one		Number Street					
sole proprietorship, use a						***************************************	
separate sheet and attach it to this petition.		0.1					
		City			State	ZIP Code	
		Check the appropriate	box to descr	ibe vour business			
		☐ Health Care Busine					
		☐ Single Asset Real E					
		☐ Stockbroker (as del			3 10 ((0))		
		☐ Commodity Broker			(6))		
		☐ None of the above		_	, ,,		
Bankruptcy Code and are you a small business debtor?	any of the	cent balance sheet, state nese documents do not e I am not filing under Chi	ement of oper exist, follow the	rations cash-flow	statement a	debtor, you must attach your and federal income tax return or if 116(1)(B).	
For a definition of small business debtor, see							
11 U.S.C. § 101(51D).		No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.					
	☐ Yes.	I am filing under Chapte Bankruptcy Code.	r 11 and I an	n a small business	debtor acco	ording to the definition in the	
art 4: Report if You Own o	or Have	Any Hazardous Prop	erty or An	y Property Tha	t Needs In	nmediate Attention	
Do you own or have any	☑ No						
property that poses or is alleged to pose a threat	Yes.	What is the hazard?					
of imminent and identifiable hazard to						the state of the s	
public health or safety?							
Or do you own any property that needs							
immediate attention?		If immediate attention is	s needed, wh	ny is it needed?			
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?							
		Where is the property?					
			Number	Street			
				.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	***************************************	THE PROPERTY OF THE PROPERTY O	
			City			State ZIP Code	

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Debtor 1

Vanessa

White

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1	:
----------------	---

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

u	I am not required	d to receive a	briefing about
	credit counselin	g because of	:

I have a mental illness or a mental deficiency that makes me incapable of realizing or making

rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court,

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

L.	I I am not required to receive a briefing ab	out
	credit counseling because of:	

I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1

-∨a	nessa	4

Vallessa First Name Middle Name

White Last Name

Case number (# known)_____

Part 6: Answer These Que	estions for Reporting Purpo	oses					
16. What kind of debts do you have?	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."						
,	No. Go to line 16b. Yes. Go to line 17.						
	16b. Are your debts prima money for a business or i	arily business debts? Business debts investment or through the operation of the	s are debts that you incurred to obtain e business or investment.				
	No. Go to line 16c. Yes. Go to line 17.						
	16c. State the type of debts yo	ou owe that are not consumer debts or bu	usiness debts.				
17. Are you filing under Chapter 7?	No. I am not filing under C	Chapter 7. Go to line 18.	·				
Do you estimate that after any exempt property is	Yes, I am filing under Chap administrative expens	oter 7. Do you estimate that after any exe les are paid that funds will be available to	mpt property is excluded and otherwise distribute to unsecured creditors?				
excluded and administrative expenses	☐ No						
are paid that funds will be available for distribution to unsecured creditors?	☐ Yes						
18. How many creditors do	2 1-49	1,000-5,000	2 5,001-50,000				
you estimate that you owe?	50-99	5,001-10,000	50,001-100,000				
owe:	☐ 100-199 ☐ 200-999	10,001-25,000	☐ More than 100,000				
19. How much do you	\$0-\$50,000	□ \$1,000,001-\$10 million	\$500,000,001-\$1 billion				
estimate your assets to be worth?	\$50,001-\$100,000	☐ \$10,000,001-\$50 million	\$1,000,000,001-\$10 billion				
De Worth:	\$100,001-\$500,000 \$500,001-\$1 million	\$50,000,001-\$100 million \$100,000,001-\$500 million	□ \$10,000,000,001-\$50 billion				
an University da			☐ More than \$50 billion				
20. How much do you estimate your liabilities	\$0-\$50,000 \$50,001-\$100,000	\$1,000,001-\$10 million	🗖 \$500,000,001-\$1 billion				
to be?	\$100,001-\$500,000	□ \$10,000,001-\$50 million □ \$50,000,001-\$100 million	\$1,000,000,001-\$10 billion				
	□ \$500,001-\$1 million	\$100,000,001-\$500 million	☐ \$10,000,000,001-\$50 billion ☐ More than \$50 billion				
Part 74 Sign Below	***	— \$100,000,001-\$300 mmm0,1	a wore than \$50 billion				
For you	I have examined this petition, as correct.	nd I declare under penalty of perjury that	the information provided is true and				
	If I have chosen to file under Chof title 11, United States Code. I under Chapter 7.	apter 7, I am aware that I may proceed, I understand the relief available under ea	if eligible, under Chapter 7, 11,12, or 13 ch chapter, and I choose to proceed				
	If no attorney represents me and this document, I have obtained a	d I did not pay or agree to pay someone and read the notice required by 11 U.S.C	who is not an attorney to help me fill out . § 342(b).				
	I request relief in accordance wi	th the chapter of title 11, United States C	ode, specified in this petition.				
	I understand making a false stat with a bankruptcy case can resu 18 U.S.C. §§ 152, 1341, 1519, a	III IN TINES UD to \$250,000, or imprisonme	money or property by fraud in connection nt for up to 20 years, or both.				
	x Varion a	Vht ×					
	Signature of Debtor 1	Signature	of Debtor 2				
	Executed on 3-17 MM / DD / Y	- / (o YYYY Executed	on				

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Debtor 1

Vanessa White

Case number (if known)_____

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

What is been a state of the sta	Date				
Signature of Attorney for Debtor		ММ	/	DD /	YYYY
Printed name					
Firm name					
Number Street		4			
M.					
city	State	ZIP Cod	e	· · · · · · · · · · · · · · · · · · ·	
Contact phone	Email address	s	·····		
Os suph .		<u></u>			
ar number	State				

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Debtor 1

Vanessa

First Name

White

Last Name

Case number (if known)_

For you if you are filing this bankruptcy without an attorney

If you are represented by an attorney, you do not need to file this page. The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned.

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

Are you aware that filing for bankruptcy is a serious action with long-term financial and legal consequences?
a No
2 Yes
are you aware that bankruptcy fraud is a serious crime and that if your bankruptcy forms are naccurate or incomplete, you could be fined or imprisoned? No Yes
id you pay or agree to pay someone who is not an attorney to help you fill out your bankruptcy forms INo Yes. Name of Person <u>Cec</u> il Davis
Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

By signing here, I acknowledge that I understand the risks involved in filing without an attorney. I have read and understood this notice, and I am aware that filing a bankruptcy case without an attorney may cause me to lose my rights or property if I do not properly handle the case.

× Van Whi	•	
Signature of Debtor 1	Signature of De	ebtor 2
3-17-16 MM/DD /YYYY	Date	MM/ DD /YYYY
Contact phone	Contact phone	
Cell phone (708) 297-7034	Cell phone	
Email address vanessawhitema@gmail.com	Email address	

Fill in this	information to identify yo	our case;		
Debtor 1	Vanessa First Name	White		
Debtor 2 (Spouse, if filin		Middle Name Last Na		
	es Bankruptcy Court for the: No	Middle Name Last Na	ame	
Case numbe		STORY DISTRICT OF MILEONS		-
	(If known)			Check if this is a amended filing
Official	Form 106Sum			
		ets and Liabilitie	es and Certain Statistical	Information 1245
Be as complinformation. your original	lete and accurate as poss . Fill out all of your schedi	ible. If two married people an ules first; then complete the i a new <i>Summary</i> and check th	re filing together, both are equally responsib information on this form. If you are filing am he box at the top of this page.	
				Your assets
1. Schedule i	A/B: Property (Official Form	106A/D)		Value of what you own
				\$ 0.00
та: оору ш	no oz, rotal personal prope	rry, from Schedule A/B		s
1c. Copy lir	ne 63, Total of all property	on Schedule A/B		s 5,010.00
Part 2: Su	ummarize Your Liabilit	ies		\$ 0,010.00
				Your liabilities Amount you owe
 Schedule D 2a. Copy th 	 Creditors Who Have Clair to total you listed in Column 	ms Secured by Property (Official	al Form 106D)	·
			ttom of the last page of Part 1 of Schedule D	\$\$
3a. Copy the	://∹: Creditors Who Have Un ⊫e total claims from Part 1 (r	secured Claims (Official Form	106E/F) line 6e of Schedule E/F	\$ 0.00
			rom line 6j of Schedule E/F	
	, ,	engine and course course in	orn line of or schedule E/F	+ \$ 9,625.00
			Your total liabilit	\$ 31,194.00
art 3; Sur	mmarize Your Income	and Expenses		
	Your Income (Official Form			
Copy your c	combined monthly income fr	om line 12 of Schedule I		\$\$ <u>4,036.00</u>
Schedule J:	Your Expenses (Official Fo	rm 106J)		
Copy your in	nontnly expenses from line	22c of Schedule J		s 3,708.00

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Debtor 1	Vanessa		Document White	Page 10 of		
	First Name Middle Name	Last N		C	Case number (# known)	
Part 4:	Answer These Questi	ons for Adı	ministrative and Sta	itistical Record	s	
6. Are yo	u filing for bankruptcy un	der Chapters	7, 11, or 13?			
	. You have nothing to report			ox and submit this	form to the court with you	r other schedules.
7. What k	ind of debt do you have?					
You fam	ur debts are primarily consily, or household purpose."	sumer debts 11 U.S.C. § 1	. Consumer debts are th	ose "incurred by a for statistical purp	n individual primarily for a oses. 28 U.S.C. § 159.	personal,
🔲 You	ur debts are not primarily of form to the court with your	consumer de	bts. You have nothing t			oox and submit
3. From th Form 12	he <i>Statement of Your Curr</i> 22A-1 Line 11; OR , Form 12	ent Monthly 2B Line 11; (<i>Income</i> : Copy your tota DR , Form 122C-1 Line 1	I current monthly ir 4.	ncome from Official	\$5,094.00
. Copy th	e following special catego	pries of clain	ns from Part 4, line 6 o	f Schedule E/F:		
					Total claim	
From	Part 4 on Schedule E/F, co	py the follo	wing:			
9a. Dom	nestic support obligations (C	opy line 6a.)			\$0	.00
9b. Taxe	es and certain other debts yo	ou owe the go	overnment, (Copy line 6t	o.)	s0	00
9c. Clain	ns for death or personal inju	ry while you v	were intoxicated. (Copy	line 6c.)	\$0.	00
9d. Stud	ent loans. (Copy line 6f.)				\$0.	00
9e. Oblig priori	gations arising out of a sepa ity claims. (Copy line 6g.)	ration agreem	nent or divorce that you	did not report as	\$0.	00
9f. Debt	s to pension or profit-sharing	g plans, and o	other similar debts. (Cop	y line 6h.)	+ \$ 0.	00

0.00

9g. Total. Add lines 9a through 9f.

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Fill in this inform	nation to identify your case and this	s filing:		
Dentor	essa	White		
Debtor 2 (Spouse, if filing) First N	· · · · · · · · · · · · · · · · · · ·	Last Name		
	Middle Name uptcy Court for the: Northern District of	Last Name Hillinois		
_	aproy a sale lot alo. Horalcal District of			
***************************************			ξ	Check if this is an
Official Ec	orm 106A/B			amended filing
Schedu	lle A/B: Propert	У		12/15
write your name	supplying correct information. If mo and case number (if known). Answ ibe Each Residence, Building,	ete and accurate as possible. If two married peoplore space is needed, attach a separate sheet to the ver every question. Land, or Other Real Estate You Own or Hawastin any residence, building, land, or similar prop	is form. On the top of a	any additional pages,
No. Go to P		ot in any residence, building, land, or Similar prop	erty?	
1 1	dress, if available, or other description	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property?	d claims on Schedule D: ns Secured by Property.
City	State ZIP Code	☐ Land ☐ Investment property ☐ Timeshare ☐ Other ☐ Who has an interest in the property? Check one.	Describe the nature of interest (such as fee the entireties, or a life	simple, tenancy by
Соцпту		☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Check if this is co (see instructions)	mmunity property
		Other information you wish to add about this its property identification number:	em, such as local	
If you own or ha	ive more than one, list here:	M6-41-0		
1.2Street addr	ress, if available, or other description	What is the property? Check all that apply. ☐ Single-family home ☐ Duplex or multi-unit building	Do not deduct secured cla the amount of any secured Creditors Who Have Clain	l claims on Schedule D:
	, , , , , , , , , , , , , , , , , , ,	Condominium or cooperative Manufactured or mobile home	Current value of the entire property?	Current value of the portion you own?
		☐ Land ☐ Investment property	\$	\$
City	State ZIP Code	Timeshare Other	Describe the nature or interest (such as fee sthe entireties, or a life	imple, tenancy by
		Who has an interest in the property? Check one.	-	-
County		Debtor 1 only Debtor 2 only		
County		Debtor 1 and Debtor 2 only At least one of the debtors and another	Check if this is cor (see instructions)	nmunity property
		Other information you wish to add about this iten property identification number:	n, such as local	

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Debtor 1			White Case number	(# Impure)	
	First Name Mit	die Name Lasi Name	- Sast Hillier	(ii Kilowii)	
1.3.	Street address, if availa	ole, or other description	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative	the amount of any secu Creditors Who Have Cla	claims or exemptions. Put red claims on <i>Schedule D</i> : aims <i>Secured by Property</i> .
			Manufactured or mobile home Land	entire property:	portion you own?
	City	State ZIP Code	☐ Land ☐ Investment property ☐ Timeshare ☐ Other	Describe the nature interest (such as fer the entireties, or a li	simple, tenancy by
			Who has an interest in the property? Check one		ie estate), ir known.
			Debtor 1 only		
	County		Debtor 2 only		
			Debtor 1 and Debtor 2 only	Check if this is c	ommunity property
			At least one of the debtors and another	(see instructions)	The second secon
			Other information you wish to add about this it property identification number:	tem, such as local	
Add t	he dollar value of the	portion you own for a	I of your ontrino from Part 4 to 1. It	_	
you h	nave attached for Part	1. Write that number h	l of your entries from Part 1, including any entri	es for pages	\$ 0.00
u own i	vans, trucks, tractors	pal or equitable interes es. If you lease a vehicle , sport utility vehicles,	t in any vehicles, whether they are registered or e, also report it on Schedule G: Executory Contracts motorcycles	not? Include any vehicle and Unexpired Leases.	s
Val (0					
	Make:	Chev Impala	Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured cla the amount of any secure	nims or exemptions. Put
	Model:	2013	Debtor 2 only	Creditors Who Have Clair	ns Secured by Property.
	Year:	20000	Debtor 1 and Debtor 2 only	Current value of the	Current value of the
	Approximate mileage:	20000	At least one of the debtors and another	entire property?	portion you own?
	Other information:		☐ Check if this is community property (see instructions)	\$21,569.00	\$0.00
If you r	own or have more than	ana dagoribo basa	· · · · · · · · · · · · · · · · · · ·		
_					
	Make:		Who has an interest in the property? Check one.	Do not deduct secured cla	ms or exemptions. Put
ŧ	Model:		Debtor 1 only Debtor 2 only	the amount of any secured Creditors Who Have Claim	claims on Schedule D: s Secured by Property.
`	Year:		Debtor 2 only Debtor 1 and Debtor 2 only	Current value of the	Current value of the
F	Approximate mileage:		At least one of the debtors and another	entire property?	portion you own?
(Other information:				
			Check if this is community property (see instructions)	\$	\$

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	Vanessa First Name Middle Name	White Case number (#	known}	
3.3.	Make:	Who has an interest in the property? Check one.	Do not deduct secured of	aims or exemptions. Put
	Model:	Debtor 1 only	the amount of any secure Creditors Who Have Clair	
	Year:	Debtor 2 only		, , ,
	Approximate mileage:	Debtor 1 and Debtor 2 only At least one of the debtors and another	Current value of the entire property?	Current value of the portion you own?
	Other information:	At least one of the deptors and another		-
		Check if this is community property (see instructions)	\$	\$
3.4.	Make:	Who has an interest in the property? Check one.		
	Model:	Debtor 1 only	Do not deduct secured cla the amount of any secure	
		Debtor 2 only	Creditors Who Have Clair	ns Secured by Property.
	Year:	Debtor 1 and Debtor 2 only	Current value of the	Current value of th
	Approximate mileage:	At least one of the debtors and another	entire property?	portion you own?
	Other information:			
		Check if this is community property (see instructions)	\$	\$
`	Make: Model: fear: Other information:	Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured cia the amount of any secured Creditors Who Have Claim	ims or exemptions. Put
		☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Current value of the entire property?	s Secured by Property.
		Debtor 1 and Debtor 2 only		s Secured by Property. Current value of the
If you o	wn or have more than one, list her	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this is community property (see instructions)		s Secured by Property. Current value of the portion you own?
If you o		☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this is community property (see instructions)	entire property?	s Secured by Property. Current value of the portion you own?
4.2. N	fake:	Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	entire property? \$ Do not deduct secured claim the amount of any secured.	current value of the portion you own? s ms or exemptions. Put claims on Schedule D:
4.2. N	fake:fodel:	Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) The community property (see instructions) The community property (see instructions) Debtor 1 only Debtor 2 only	entire property? \$ Do not deduct secured claim	current value of the portion you own? s ms or exemptions. Put claims on Schedule D:
4.2. N N	fake:fodel:	Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	entire property? \$	current value of the portion you own? s ms or exemptions. Put claims on Schedule D: s Secured by Property. Current value of the
4.2. N N	fake:fodel:	Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) The community property (see instructions) The community property (see instructions) Debtor 1 only Debtor 2 only	entire property? \$	current value of the portion you own? \$
4.2. N N	fake:fodel:	Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured claim the amount of any secured Creditors Who Have Claim: Current value of the entire property?	current value of the portion you own? s ms or exemptions. Put claims on Schedule D: s Secured by Property. Current value of the

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Debtor 1	vanessa	White Cas	se number (if known)
	First Name Middle Name	Last Name	
Part 3:	Describe Your Persona	l and Household Items	
Do you ow	n or have any legal or equi	itable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6. Househ	old goods and furnishings	s	, , , , , , , , , , , , , , , , , , , ,
☐ No		re, linens, china, kitchenware	
Yes.	Describe Househo	old goods and furnishing	\$3,200.00
7. Electron			
Example No	s: Televisions and radios; a collections; electronic dev	udio, video, stereo, and digital equipment; computers, prin vices including cell phones, cameras, media players, game	nters, scanners; music es
	Describe Televisio	n, computer, cell phone	050.00
		,	\$850.00
	les of value		
Example No	s: Antiques and figurines; pa stamp, coin, or baseball c	aintings, prints, or other artwork; books, pictures, or other a card collections; other collections, memorabilia, collectibles	art objects; s
	Describe		•
			\$
	nt for sports and hobbies		
Example ☑ No	s: Sports, photographic, exe and kayaks; carpentry too	ercise, and other hobby equipment; bicycles, pool tables, g ols; musical instruments	polf clubs, skis; canoes
	Describe		
			\$
10. Firearms	Ph. 4 4 100		
Example. No	5: Pistols, rifles, shotguns, ar	mmunition, and related equipment	
	Describe		•
			\$
11. Clothes	ar Francisco de la constanta d		
□ No	Everyday clothes, furs, lea	ather coats, designer wear, shoes, accessories	
	Describe Everyday	clothes and shoes	\$ 960.00
			\$\$
12. Jewelry			
Examples	: Everyday jewelry, costume gold, silver	e jewelry, engagement rings, wedding rings, heirloom jewe	efry, watches, gems,
☑ No ☐ Yes. [Describe		\$
13. Non-farm	animals		
Examples	Dogs, cats, birds, horses		
☑ No			
U Yes. □	escribe		\$
	personal and household it	items you did not already list, including any health aid	s you did not list
No No	iive specific		
	ation,		\$
		ntries from Part 3, including any entries for pages you	The state of the s
for Part 3.	Write that number here	itries from Part 3, including any entries for pages you	\$ 5,010.00

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Debtor 1	Vanessa		White	Case number (# known)	
	first Name	Middle Name Last Name		TOTAL STORY	**************************************
Part 4:	Describe Yo	our Financial Assets			
Do you ow	vn or have any	/ legal or equitable interest in	any of the following?	***************************************	Current value of the portion you own?
					Do not deduct secured claims or exemptions.
16. Cash					
Exampl	les: Money you	have in your wallet, in your ho	me, in a safe deposit box	, and on hand when you file your petition	
⊘ No					
☐ Yes		***************************************	***************************************	Cash:	¢.
				Cash	\$
	ts of money les: Checking :	savings or other financial accor	unts: cartificates of donor	sit; shares in credit unions, brokerage houses	
	and other s	similar institutions, If you have n	nultiple accounts with the	same institution, list each.	,
⊠ No					
□ Yes	***************************************		Institution name:		
		17.1. Checking account:	***************************************		\$
		17.2. Checking account:			\$
		17,3, Savings account:			\$
		17.4. Savings account:			¢.
		17.5. Certificates of deposit:			*
		17.6. Other financial account:			\$
					\$
		17.7. Other financial account:			\$
		17.8. Other financial account:			\$
		17.9. Other financial account:			\$
					Ψ
18. Bonds, r	mutual funds,	or publicly traded stocks			
	s: Bond funds,	investment accounts with broke	erage firms, money marke	et accounts	
☑ No					
₩ Yes.		Institution or issuer name:			
					\$
					\$
					\$
19. Non-pub an Li C.	licly traded st	tock and interests in incorpor and joint venture	ated and unincorporate	ed businesses, including an interest in	
2 No	le or minimizerby o				
	Give specific	Name of entity:		% of ownership: 0%	
inforn	nation about			00/	\$
er (C)11,	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	W. C.	The second secon	078 %	\$

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Debtor 1	Vanessa First Name	Middle Name	White Last Name	Case number (if known)	
20. Gover r	nment and corp	orate bonds and oth	er negotiable and non-nego	tiable instruments	
Negotia Non-ne	able instruments gotiable instrum	include personal che ents are those you ca	cks, cashiers' checks, promissi nnot transfer to someone by si	ory notes, and money orders. igning or delivering them.	
Ø No					
	. Give specific rmation about	Issuer name:			
then	n				\$
					\$
					\$
	nent or pension				
	es: Interests in II	RA, ERISA, Keogh, 4	01(k), 403(b), thrift savings acc	counts, or other pension or profit-sharing plans	
☑ No	. List each				
		Type of account:	Institution name:		
		401(k) or similar plan:			\$
		Pension plan:			\$
		IRA:			_
		Retirement account:			\$
		Keogh:			\$
		Additional account:			\$
		Additional account:			\$
		Account account.			\$
Your sha Example compani	es: Agreements ves, or others	deposits you have m	ade so that you may continue s f rent, public utilities (electric, g	service or use from a company pas, water), telecommunications	
Yes		Ins	titution name or individual:		
		Electric:			\$
		Gas:			\$
		Heating oil:			\$
			al unit:		\$
		Prepaid rent: Telephone:			\$
		Water:			\$
		Rented furniture:			\$
		Other:			\$
		 			\$
Annuities	s (A contract for	a periodic payment of	money to you, either for life or	for a number of years)	
2 No			, , , , , , , , , , , , , , , , , , ,	I manual or justicy	
Yes	**************	Issuer name and descri	ription;		
					\$
					\$

Debtor	٠

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24. Interests in an education IR 26 U.S.C. §§ 530(b)(1), 529A	(A, in an account in a qualific	ed ABLE program, or under a qual	lified state tuition program	1.
☑ No	(O), and 020(D)(1).			
Q Yes				
	institution name and descrip	ption. Separately file the records of a	ny interests.11 U.S.C. § 52	1(c):
				\$
				_ \$
				- \$
				- 3
25. Trusts, equitable or future in exercisable for your benefit	nterests in property (other th	han anything listed in line 1), and r	rights or powers	
2 No				
Yes. Give specific				
information about them				\$
				T
26. Patents, copyrights, tradem	arks, trade secrets, and other	er intellectual property		
⊏xampies: Internet domain na	mes, websites, proceeds from	royalties and licensing agreements		
☑ No				
Yes. Give specific information about them				
inomation about them				\$
27 Licenses franchises and a	U			
27. Licenses, franchises, and ot Examples: Building nemits, ex	ner general intangibles	association holdings, liquor licenses		
☑ No	consider nochises, cooperative	association fioldings, liquor licenses	, professional licenses	
Yes. Give specific				
information about them				_
				\$
Money or property owed to you	?			
	•			Current value of the portion you own?
				Do not deduct secured
29 Tay refunds and to				claims or exemptions.
28. Tax refunds owed to you No				
	_			
Yes. Give specific informati about them, including	ion whether		Federal:	\$
you already filed the re	eturns		State:	ф
and the tax years				\$
			Local:	\$
29. Family support				
	im alimony, spousal support o	shild support, maintenance, divorce s	mettlement ::	
☑ No	ammony, opodour support, c	and support, maintenance, divorce s	ettlement, property settleme	ent
Yes. Give specific information	on			
	Delt		Alimony:	¢
			Maintenance:	Φ
				\$
			Support:	\$
			Divorce settlement:	\$
20. Oth an and			Property settlement:	\$
 Other amounts someone owe Examples: Unpaid wages, disab Social Security bene 	s you oility insurance payments, disa efits; unpaid loans you made to	ability benefits, sick pay, vacation pay	v, workers' compensation,	
☑ No	,para rasma you made to	A SOULCAND DISC		
Yes. Give specific information	ìn			
= opcome anomatic	A1			

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31. Interests in insurance policies			
Examples: Health, disability, or life insura	ance; health savings account (HSA); cr	edit, homeowner's, or renter's insurance	
☑ No			
Yes. Name the insurance company of each policy and list its value.	Company name:	Beneficiary:	Surrender or refund value:
			\$
32. Any interest in property that is due yo			
If you are the beneficiary of a living trust, property because someone has died.	expect proceeds from a life insurance	policy, or are currently entitled to receive	
No			
☐ Yes. Give specific information			\$
			Ψ
33. Claims against third parties, whether of Examples: Accidents, employment disput	or not you have filed a lawsuit or mad	le a demand for payment	
☑ No	es, insurance claims, or rights to sue		
Yes. Describe each claim			
Too. Becombe each claim.	•		\$
34. Other contingent and unliquidated claim	ms of every nature, including counts	relaims of the dobtor and rights	Y
to set off claims	or overy materies, mendering country	rotating of the deptor and rights	
☑ No			
Yes. Describe each claim.			
			\$
35. Any financial assets you did not alread	y list		
☑ No			
Yes. Give specific information			¢
			Ψ
36. Add the dollar value of all of your entrie	es from Part 4, including any entries	for pages you have attached	
for Part 4. Write that number here			\$0.00
Part 5: Describe Any Business-	Related Property You Own o	r Have an Interest In. List an	real estate in Bart 1
			rearestate in Part 1.
37. Do you own or have any legal or equital	ble interest in any business-related p	roperty?	
No. Go to Part 6.			
Yes. Go to line 38.			
			Current value of the
			portion you own?
			Do not deduct secured claims or exemptions.
38. Accounts receivable or commissions yo	ou already earned		,
☑ No	-		
☐ Yes. Describe			
			\$
99. Office equipment, furnishings, and supp	plies		
Examples: Business-related computers, software	, modems, printers, copiers, fax machines, ri	ugs, telephones, desks, chairs, electronic devic	es
M No			
Yes. Describe			\$
			w

Debtor 1	Case 1 Vanessa First Name	Aiddle Name	Doc 1	Filed 03/17/16 VDdcument	Entered 03/17/16 Page 19 of 49 number (11:47:50	Desc Main
40. Machi n	nery, fixtures, e	quipment, su	pplies you u	se in business, and to	ols of your trade		
☑ No							
☐ Yes	s. Describe						\$
41. Invento	ory						
₩ No							
☐ Yes	s. Describe						\$
42. Interes t	ts in partnershi	ips or joint ve	ntures				
☑ No							
└ Yes	. Describe	Name of entity	r:			% of ownership);
						%	\$
						%	\$
						%	\$
	□ No □ Yes. Descri	ribe			lefined in 11 U.S.C. § 101(41A))??	\$
Yes.	. Give specific						
infor	mation				A Committee of the Comm		\$
			· · · · · · · · · · · · · · · · · · ·				\$
							\$
							\$
		·				V	\$
							\$
5. Add the for Part	dollar value of 5. Write that n	f all of your er umber here	ntries from P	Part 5, including any e	ntries for pages you have att	ached	s O
ent 6; 6. Do you c	Describe An	y Farm- and have an intere	Commerce est in farmla	ial Fishing-Related nd, list it in Part 1.	Property You Own or Had	ve an Interest	
	= 3 to 10.10 Tr.						
							Current value of the portion you own?
							Do not deduct secured claims or exemptions.

47. Farm animals

☐ Yes.....

No No

Examples: Livestock, poultry, farm-raised fish

Debtor 1 Vanessa Widdle Name Last Name	ument		53/17/10 11.47.50 cas9number (# known)	Desc Ma	
48. Crops—either growing or harvested					
☑ No ☑ Yes. Give specific					
information				\$	
49. Farm and fishing equipment, implements, machinery, fix No	tures, and to	ols of trade		\ 	
☐ Yes					
				\$	· · · · · · · · · · · · · · · · · · ·
50. Farm and fishing supplies, chemicals, and feed No					
☐ Yes					
				\$	
51. Any farm- and commercial fishing-related property you d	lid not already	y list			
Yes. Give specific information					
				\$	
52. Add the dollar value of all of your entries from Part 6, inc for Part 6. Write that number here	luding any en	tries for pages	you have attached	→ \$	0.00
Part 7: Describe All Property You Own or Hav	ve an Inter	est in That	You Did Not List Abo	ve	
53. Do you have other property of any kind you did not alread Examples: Season tickets, country club membership	dy list?				
☑ No ☐ Yes. Give specific				¢	
information				\$	***************************************
				\$	15 T C TO 17 T C T T T T T T T T T T T T T T T T T
54. Add the dollar value of all of your entries from Part 7. Writ	te that numbe	r here		→ s	0.00
Part 8: List the Totals of Each Part of this For	rm				
55. Part 1: Total real estate, line 2	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			→ \$	0.00
56. Part 2: Total vehicles, line 5	\$	0.00			
57. Part 3: Total personal and household items, line 15	\$	5,010.00			
58. Part 4: Total financial assets, line 36	\$	0.00			
59. Part 5: Total business-related property, line 45	\$	0.00			
60. Part 6: Total farm- and fishing-related property, line 52	\$	0.00			
61. Part 7: Total other property not listed, line 54	+\$	0.00			
62. Total personal property. Add lines 56 through 61	\$	5,010.00	Copy personal property total	→ +\$	5,010.00
63. Total of all property on Schedule A/B. Add line 55 + line 62				\$	5,010.00
			***************************************	φ	

Fire	inessa	White		
Debtor 2	st Name Middle Name	Last Name	and the second s	
Spouse, if filing) Fire	it Name Middle Name	Last Name		
Inited States Ban	kruptcy Court for the: Northern Dist	rict of Illinois	lacksquare	
Case number				Check if this is
				amended filing
veciii	1000			
official Fo	**************************************			
chedu	le C: The Pro	perty You	Claim as Exemp	12/15
ace is needed, f ur name and ca: r each item of j ecific dollar an any applicable	ill out and attach to this page as se number (if known). property you claim as exempt nount as exempt. Alternatively statutory limit. Some exempti	many copies of Part 2: A , you must specify the A Y, you may claim the full the fu	A/B) as your source, list the property that Additional Page as necessary. On the top amount of the exemption you claim. On the fair market value of the property being the health aids, rights to receive certain.	o of any additional pages, write One way of doing so is to state a ng exempted up to the amount benefits, and tax-exempt
its the exempt	ion to a particular dollar amοι to the applicable statutory am	int and the value of the ount.	claim an exemption of 100% of fair m property is determined to exceed tha	t amount, your exemption
art 1: Iden	tify the Property You Clair	n as Exempt		
. Which set of	exemptions are you claiming?	? Check one only, even i	f your spouse is filing with you.	
. Which set of	exemptions are you claiming?	? Check one only, even in	f your spouse is filing with you. U.S.C. § 522(b)(3)	
Which set of	exemptions are you claiming?	? Check one only, even in	f your spouse is filing with you. U.S.C. § 522(b)(3)	
. Which set of ☑ You are cl	exemptions are you claiming? aiming state and federal nonbar aiming federal exemptions. 11 to	? Check one only, even it nkruptcy exemptions. 11 J.S.C. § 522(b)(2)	U.S.C. § 522(b)(3)	
Which set of You are cl	exemptions are you claiming? laiming state and federal nonbar aiming federal exemptions. 11 features.	R Check one only, even in haruptcy exemptions. 11 U.S.C. § 522(b)(2)	f your spouse is filing with you. U.S.C. § 522(b)(3) pt, fill in the information below.	
Which set of You are cl You are cl For any prope	exemptions are you claiming? aiming state and federal nonbar aiming federal exemptions. 11 to	R Check one only, even in haruptcy exemptions. 11 U.S.C. § 522(b)(2)	U.S.C. § 522(b)(3)	Specific laws that allow exemption
Which set of You are cl You are cl For any propo	exemptions are you claiming? aiming state and federal nonbar aiming federal exemptions. 11 I erty you list on Schedule A/B: tion of the property and line on	R Check one only, even in hkruptcy exemptions. 11 U.S.C. § 522(b)(2) that you claim as exem	U.S.C. § 522(b)(3)	Specific laws that allow exemption
Which set of You are cl You are cl For any prope Brief descrip Schedule A/E	exemptions are you claiming? aiming state and federal nonbar aiming federal exemptions. 11 I erty you list on Schedule A/B: tion of the property and line on	R Check one only, even in hkruptcy exemptions. 11 U.S.C. § 522(b)(2) that you claim as exem Current value of the portion you own Copy the value from Schedule A/B	U.S.C. § 522(b)(3) pt, fill in the information below. Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption 735 ILCS 5/12-1001(b)
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Fill i	n this information to identify your ca	156:			
Debto	Vanasas	White			
Debto	Ųs I	Name Last Name			
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Unite	d States Bankruptcy Court for the: Northern				
		n District of Illinois			
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Off	ficial Form 106D				
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5111011	macon a more space is needed, cor	. If two married people are filing together, both are e by the Additional Page, fill it out, number the entries,	qually responsible f and attach it to this	or supplying correct form. On the top of	it fanv
addit	tional pages, write your name and ca	se number (if known),		on the top of	ally
1. Do	any creditors have claims secured	by your property?			
	No. Check this box and submit this for	m to the court with your other schedules. You have noth	ina else to renort on t	his form	
¥	Yes. Fill in all of the information below		ing elac to report on t	ras ioni.	
Part '	A List All Secured Claims				
2. List	t all secured claims. If a creditor has r	more than one secured claim, list the creditor separately	Column A	Column B	Column C
IOF	each claim. If more than one creditor I	18S a particular claim list the other creditors in Part 2	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
	modifies possible, list the claims in alp	habetical order according to the creditor's name.	value of collateral.	claim	If any
	restige Financial	Describe the property that secures the claim:	\$ 21,569.00	\$ 22,600.00	\$ 0.00
	iditor's Name 420 S 500 W				Υ
	nber Street	_			
		As of the date you file, the claim is: Check all that apply.			
	olt laba Olta LIT Orace	Contingent			
City	alt Lake City UT 84115 State ZIP Code	Ma Unliquidated			
Who	owes the debt? Check one.	☐ Disputed			
	Debtor 1 only	Nature of lien. Check all that apply.			
	Pebtor 2 only	An agreement you made (such as mortgage or secured car loan)			
<u></u> D	Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
L i A	t least one of the debtors and another	Judgment lien from a lawsuit			
	check if this claim relates to a	Other (including a right to offset)	-		
Date	ommunity debt debt was incurred 08/08/2041	3 5 0 0			
2.2	dest was incurred	Last 4 digits of account number 3 5 0 0			
Cred	ditor's Name	Describe the property that secures the claim:	\$	\$	<u> </u>
Num	nber Street	An of the data was Clarkly stated to the			
		As of the date you file, the claim is: Check all that apply. Contingent			
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City	State ZIP Code	☐ Disputed			
	owes the debt? Check one.	Nature of lien. Check all that apply.			
en.	eblor 1 only ebtor 2 only	An agreement you made (such as mortgage or secured			
	ebtor 2 only ebtor 1 and Debtor 2 only	car loan) Statutory lien (such as tax lien, mechanic's lien)			
	least one of the debtors and another	Judgment lien from a lawsuit			
	heck if this claim relates to a	Other (including a right to offset)			
co	ommunity debt				
	debt was incurred	Last 4 digits of account number			
Δdc	the dollar value of your entries in C	column ∆ on this nage. Write that number here-	21.569.00		

Debtor 1 Variessa White Debtor 2 Debtor 2 Debtor 2 Debtor 2 Debtor 3 Debtor 2 Debtor 4 Debtor 5 Debto	Ē	Case 16-09201 Doc 1		ntered 03/17/16 11	:47:50 [Desc Main	l
Debtor 2 Continue Debtor 2 Debtor 2 Debtor 2 Debtor 3 Debtor 2 Debtor 4 Debtor 2 Debtor 4 Debtor 4 Debtor 5							
Check if this is armended filing Check if this is a complete and accurate as possible. Use Part 1 for creditors with RONNT-RORITY claims and Part 2 for creditors with NONNT-RORITY claims. List the other party to any exclusive production of the control		Pedici					
United States Bankruptcy Court for the: Northern District of Illinois Case number (If toxici) Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/11 Be as complete and accurate as possible, Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. Als: Properly Official Form 104R) and on Schedule G. Care unsequence to the other party to any executory contracts or unsequence to the other party to any executory contracts or unsequence to the other party to any executory contracts or unsequence to the other party to any executory contracts or unsequence to the other party to any executory contracts on Schedule G. Care to the other party to any executory contracts or Schedule G. Care to the other party to the other party to any executory contracts on Schedule G. Care to the other party to the party to the Party van execution (Ill to out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top any additional pages, write your name and case number of Known). List All of Your PRIORITY Unsecured Claims 1. Do any redditors have priority unsecured claims against you? No. Go to Part 2. List all of your priority unsecured claims is if a claim has both priority and nonpriority amounts. Its that care door separately for each claim. For each claim listed, identify what type of claim is if a claim has both priority and rompriority unsecured claims. Its out the Continuation Page of Part 1. If more than one priority unsecured claims, list the other creditors in Part 3. Floority and priority unsecured claims is for this form in the instruction booklet.) Total claim Priority and priority unsecured claims. Last 4 digits of account number When was the debt incurred? As of the date you flie, the claim is: Check all that apply Other Spooty Other Spooty Cay Shate ZiP Code Who incurred the debt? Check one. Debter 1 only Debter 1 only Debter 1 only Debter 2 only Type of PRIORITY unsecured claims:			Lost Name				
Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. Also list executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Surfacion. Also distributions with the party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Surfacion. Also distributions with NoNPRIORITY claims and Part 2 for creditors with NoNPRIORITY claims, and the party to any executory contracts on Surfacional Control of the Party on any executory contracts on Surfacional Control of the Party on any calculations and case number (if known). List All of Your PRIORITY Unsecured Claims against you? No. Go to Part 2. List All of Your priority unsecured claims, if a creditor has more than one priority unsecured claims, is the calculation priority and nonpriority amounts. Is that claims here and clavols exhiptions and compriority amounts. As more has possible, site the claims in aphabetical order according to the creditor's name. If you have more than two priority unsecured claims, is the claims in aphabetical order according to the creditor's name. If you have more than two priority unsecured claims, is the other creditors in Part 3. [For an explanation of each type of claim, see the instructions for his form in the instruction booklet.) Total claim Priority Nonpriority and priority unsecured claims, is the other creditors in Part 3. [For an explanation of each type of claim, see the instructions for his form in the instruction booklet.) Total claim Priority Nonpriority and the debt of the claim is claim the claim in priority unsecured claims. For a community debt is the claim in aphabetical order according to the claim in the claim is claim the claim in the creditor and the continu	ĺ						
Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/11 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts on Sulvavian. AB: Property (Official Form 166AB) and on Schedules part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. AB: Property (Official Form 166AB) and on Schedules part 1 for creditors with partially secured claims that are listed in Schedule D: Creditor of the part 2 for creditors with PRIORITY bursel partial property of the part you need, fill it out, number the entries in the boxes on the loft. Attach the Continuation Page to this page. On the top any additional pages, write your name and case number (if known). Part 1 List All of Your PRIORITY Unsecured claims. 1. Do any creditors have priority unsecured claims. If a creditor has more than one priority unsecured daims, list that claim here and shove both priority and nonpriority amounts. As much as possible, list the claim is if a claim has both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the use in pure than two proofity unsecured claims. If a creditor has more than one priority amounts, list that claim here and shove both priority and nonpriority amounts. As much as possible, list the claim is in alphabetical order according to the use in pure more than two proofity and nonpriority amounts. As much as possible, list the claim is in alphabetical order according to the use in pure more than two proofity amounts. [For an explanation of each type of claim, see the instructions for this form in the instruction booklet.] [For an explanation of each type of claim, see the instructions for this form in the instruction booklet.] [For an explanation of each type of claim, see the instructions for this form in Priority Nonpriority amounts. [For an explanation of each type of claim, and the cl			L			☐ Che	rk if this is an
Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule 62. Executory Contracts and Unexpired Leases (Official Form 1649) per on Schedule 62. Executory Contracts and Unexpired Leases (Official Form 1649) per on Schedule 62. Executory Contracts and Unexpired Leases (Official Form 1649) per on the contract or creditors with partially secured claims that are listed in Schedule D. Creditors Who have Claims Schedule D. Creditors Who							
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1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. Yes.	A/E cre ned any	at the other party to any executory contracts or 3: Property (Official Form 106A/B) and on Schedulitors with partially secured claims that are list eded, copy the Part you need, fill it out, number y additional pages, write your name and case no	unexpired leases that could dule G: Executory Contracts ted in Schedule D: Creditors the entries in the boxes on umber (if known).	result in a claim. Also list and Unexpired Leases (st executory o	ontracts on S 106G) Do not	chedule insteds any
No. Go to Part 2. Yes. Yes.					· · · · · · · · · · · · · · · · · · ·		
2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim fisted, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim Priority Nonpriority amounts. In the creditor's name when we have the debt incurred? Last 4 digits of account number \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	••		ns against you?				
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Last 4 digits of account number \$ \$ \$,	Total claim	•	Nonpriority
Number Street As of the date you file, the claim is: Check all that apply City State ZIP Code Contingent Unliquidated	2.1					amount	amount
As of the date you file, the claim is: Check all that apply. City State ZIP Code Contingent Unfiquidated Unfiquidated Disputed	L	Priority Creditor's Name	Last 4 digits of account nu	mber	\$	\$	\$
As of the date you file, the claim is: Check all that apply. City		Number Street	When was the debt incurre	ed?			
City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Check if this claim is for a community debt Is the claim subject to offset? No Yes Z.2 Priority Creditor's Name When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply City State ZIP Code Who incurred the debt? Check one. Disputed Contingent Undiquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of PRIORITY unsecured claim:		Trained Street	As of the date you file, the	claim is: Check all that anniv			
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At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply City State ZIP Code Who incurred the debt? Check one. Debtor 2 only Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Other. Specify As of the date ount number Street As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of PRIORITY unsecured claim:							
Claims for death or personal injury while you were intoxicated Claims for death or personal injury while you were intoxicated No							
Other. Specify Yes Last 4 digits of account number \$ \$ \$ Priority Creditor's Name When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply City State ZIP Code Unliquidated Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Type of PRIORITY unsecured claim:		☐ Check if this claim is for a community debt	Claims for death or persor				
Yes							
Priority Creditor's Name Cast 4 digits of account number \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$			Utner. Specify				
Priority Creditor's Name Cast 4 digits of account number \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	2.2						
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Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Type of PRIORITY unsecured claim:			☐ Contingent				
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I I toppopho crippost abligations							
Debics Faild Debics 2 Office		Debtor 1 and Debtor 2 only					
☐ At least one of the debtors and another ☐ Taxes and certain other debts you owe the government ☐ Out of the debtors and another							
☐ Check if this claim is for a community debt Claims for death or personal injury while you were intoxicated		☐ Check if this claim is for a community debt		al injury while you were			
Is the claim subject to offset? Other. Specify		☐ No					

Debtor 1

Vacassa 16-09201
First Name Middle Name

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Part 1:

Your PRIORITY Unsecured Claims — Continuation Page

Af	ter listing any entries on this page, number ther	n beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonpriority amount
	Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
	Number Street	When was the debt incurred?			
		As of the date you file, the claim is: Check all that apply.			
	City State ZIP Code	Contingent Unliquidated			
	Who incurred the debt? Check one.	☐ Disputed			
	Debtor 1 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only	Domestic support obligations			
	Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	 Claims for death or personal injury while you were intoxicated 			
	Is the claim subject to offset?	Other. Specify			
	☐ No ☐ Yes				
	105				
	Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
	Number Street	When was the debt incurred?			
		As of the date you file, the claim is: Check all that apply.			
	Oil	Contingent			
	City State ZIP Code	Unliquidated			
	Who incurred the debt? Check one.	Disputed			
	Debtor 1 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only				
	Debtor 1 and Debtor 2 only	Domestic support obligations			
	At least one of the debtors and another	Taxes and certain other debts you owe the government			
	☐ Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated Other. Specify			
	Is the claim subject to offset?	— Ottor. Specify			
_	□ No □ Yes				
L	Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
	Number Street	When was the debt incurred?			
		As of the date you file, the claim is: Check all that apply.			
		☐ Contingent			
	City State ZIP Code	☐ Unliquidated			
	Who incurred the debt? Check one.	☐ Disputed			
	***************************************	T (DDIODITIC			
	Debtor 1 only Debtor 2 only	Type of PRIORITY unsecured claim:			
	Debtor 1 and Debtor 2 only	☐ Domestic support obligations			
	At least one of the debtors and another	Taxes and certain other debts you owe the government			
	Check if this claim is for a community debt	Claims for death or personal injury white you were intoxicated			
	•	Other, Specify			
	Is the claim subject to offset?				
	□ No □ Vaa				
	1 # 3/				

Debtor 1	V@asse a16-09201	Doc 1	₩ q @ 03/17/16	Entered 03/17/16 11:47:5	50 Desc Main
	First Name Middle Name	Last Na	n Document	Page 25 of 49 ^{number (if known)}	

		THE THE THE		Document	raye 23 01 43	
100000000000000000000000000000000000000					•	
	list All of	VALLE MANDER	3017V :	cured Claims		

3.	Do any creditors have nonpriority to No. You have nothing to report in Yes	insecured this part, S	claims against	you? o the court with your other schedules.	***************************************			
4.		editor hold		cal order of the creditor who holds each claim. If a creditor ha claim. For each claim listed, identify what type of claim it is. Do no im, list the other creditors in Part 3.If you have more than three no				
4.1	Zingo Cash Illinois, LLC				Tot	al claim		
	Nonpriority Creditor's Name			Last 4 digits of account number	\$	1,490.00		
	PO Box 5601			When was the debt incurred? 12/17/2014	·			
	Number Street							
	Vernon Hills	State	60061 ZIP Code	As of the date you file, the claim is: Check all that apply.				
				☐ Contingent				
	Who incurred the debt? Check one.			Unliquidated				
	Debtor 1 only			☑ Disputed				
	Debtor 2 only			·				
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:				
	At least one of the debtors and anothe	r		☐ Student loans				
	Check if this claim is for a comme	ınity debt		Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts	ì			
	☑ No			✓ Other Specify Loan				
	☐ Yes							
.2	AD Astra Recovery Service					4 000 00		
	Nonpriority Creditor's Name			Last 4 digits of account number	\$	1,690.00		
	3611 N Ridge R 104 Number Street			When was the debt incurred? 09/03/2015				
	Wichita	KS	67205	As of the date you file, the claim is: Check all that apply.				
	City	State	ZIP Code	☐ Contingent				
	Who incurred the debt? Check one.			Unliquidated				
	☑ Debtor 1 only			Disputed				
	Debtor 2 only			• •				
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:				
	At least one of the debtors and another			Student foans				
				Obligations arising out of a separation agreement or divorce				
	☐ Check if this claim is for a commu	nity debt		that you did not report as priority claims				
	Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts				
	☑ No			Other. Specify Loan				
3	Yes							
3	Merchants Credit Guide Nonpriority Creditor's Name	····		Last 4 digits of account number		354.00		
	223 W Jackson Suite 900			When was the debt incurred? 08/27/2015	Φ			
	Number Street		·	Tables				
	Chicago	IL	60606					
	City	State	ZIP Code	As of the date you file, the claim is: Check all that apply.				
	Who incurred the debt? Check one.			☐ Contingent				
	Debtor 1 only			☐ Unliquidated				
	Debtor 2 only			☑ Disputed				
	Debtor 1 and Debtor 2 only							
	At least one of the debtors and another			Type of NONPRIORITY unsecured claim:				
				☐ Student loans				
	Check if this claim is for a commun	ity debt		Obligations arising out of a separation agreement or divorce				
	Is the claim subject to offset?			that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts				
	☑ No ☐ Yes			Other. Specify Credit				
	162			· · · · · · · · · · · · · · · · · · ·				

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Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

4.4		2	th 4.4, followed by 4.5, and so forth.	Total claim
MCSI Inc Nonpriority Creditor's Name			Last 4 digits of account number	s 1,800.00
PO Box 327			When was the debt incurred? 03/15/2015	Y
Number Street Palos Heights City	IL	60463	As of the date you file, the claim is: Check all that apply.	
Who incurred the debt? (Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or At least one of the debtor	nly rs and another	ZIP Code	 ☐ Contingent ☐ Unliquidated ☐ Disputed ☐ Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
☐ Check if this claim is the claim subject to off ☑ No ☐ Yes	•		Debts to pension or profit-sharing plans, and other similar debts Other. Specify Traffic tickets	
Finance Department Nonpriority Creditor's Name			Last 4 digits of account number When was the debt incurred? 12/03/2014	\$ <u>1,291.00</u>
121 N LaSalle Street	t 7th Floor			
Chicago City	IL State	60602 ZIP Code	As of the date you file, the claim is: Check all that apply. Contingent	
Who incurred the debt? Cl Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 onl At least one of the debtors Check if this claim is for Is the claim subject to offs No Yes	y and another or a community debt		 Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Parking tickets 	
Illinois Tollway Centra Nonpriority Creditor's Name 2700 Ogden Ave Number Street	al Administration B	uilding	Last 4 digits of account number	§ 3,000.00
Downers Grove City Who incurred the debt? Chi	IL State eck one.	60515 ZIP Code	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors: Check if this claim is for is the claim subject to offset No Yes	and another		Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Unpaid tolls	

Debtor 1

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Part 3:

City

State

ZIP Code

List Others to Be Notified About a Debt That You Already Listed

Illinois Secretary of Stat			ons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. On which entry in Part 1 or Part 2 did you list the original creditor?
2701 S Dirksen Parkwa	v		Line 4.4 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	<i></i>		Part 2: Creditors with Nonpriority Unsecured Claims
Carina Catal			Last 4 digits of account number 1 4 7 9
Springfield City	IL. State	62723 ZIP Code	East 4 digits of account humber
Country Club Hills Polic	e Departm		On which entry in Part 1 or Part 2 did you like the sale to be a
Name			On which entry in Part 1 or Part 2 did you list the original creditor?
3700 W 175th Place			Line 4.4 of (Check one): Part 1: Creditors with Priority Unsecured Claims
			Part 2: Creditors with Nonpriority Unsecured Claims
Country Club Hills	IL State	60478 ZIP Code	Last 4 digits of account number
		2.11 0000	On which entry in Part 1 or Part 2 did you list the original creditor?
ame		***************************************	
lumber Street	·		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
	······································		Claims Part 2: Creditors with Nonpriority Unsecured
ity	State	ZIP Code	Last 4 digits of account number
ame	·····		On which entry in Part 1 or Part 2 did you list the original creditor?
rumber Street	·		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
antibes Street			Claims Part 2: Creditors with Nonpriority Unsecured
ity	State	ZIP Code	Last 4 digits of account number
ame			On which entry in Part 1 or Part 2 did you list the original creditor?
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
umber Street			Claims Part 2: Creditors with Nonpriority Unsecured
by	State	ZIP Code	Last 4 digits of account number
	State	ZIP COOR	On which entry in Part 1 or Part 2 did you list the original creditor?
me			
umber Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Y			Last 4 digits of account number
	State	ZIP Code	
me			On which entry in Part 1 or Part 2 did you list the original creditor?
mber Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
			Claims Part 2: Creditors with Nonpriority Unsecured

Last 4 digits of account number ____

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Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim	
Total claims	6a. Domestic support obligations	6a.	\$	0.00
from Part 1	6b. Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+ \$	0.00
	6e. Total. Add lines 6a through 6d.	6e.	\$	0.00
			Total claim	
Total claims from Part 2	6f. Student loans	6f.	\$	0.00
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	+ \$	9,625.00
	6j. Total. Add lines 6f through 6i.	6j.	\$	9,625.00

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Fill in t	his information to	identify your ca	ise:				
Debtor	Vanessa First Name	Mineta	White				
Debtor 2				Name			
ļ	tates Bankruptcy Cour			Name			
Case nu							
(If known)						Check if this is ar amended filing
							amenaca ming
	al Form 106						
Sche	edule G: E	Executo	ry Contract	s and U	nexpired Lea	ases	12/15
2. List: examunex Pers 2.1 Name	No. Check this box a res. Fill in all of the in- separately each per nple, rent, vehicle in pired leases.	and file this form information below rson or compar lease, cell phon	v even if the contracts o	or leases are listence the contract of for this form in the	You have nothing else to rid on Schedule A/B: Proper or lease. Then state what does instruction booklet for most	ty (Official Form 106 each contract or lea ore examples of exe	
City		State Z	IP Code				
2.2 Name				·····			

Numb	er Street						
City		State Z	IP Code	*************************************			
2.3 Name				TO THE RESIDENCE OF THE PARTY O			
Numb	er Street						
City	**************************************	State Z	IP Code	***************************************			
2.4 Name		· · · · · · · · · · · · · · · · · · ·					
Numbe	Dr. Chroot			·····			
INTERNA	er Street						

City

Name

Number

City

Street

2.5

State

State

ZIP Code

ZIP Code

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Filli	in this infor	mation to identify	yyour case:		
Debt		nessa	White		
Debt		st Name	Middle Name Last	Name	
l	ise, if filing) Fin			Name	
Unite	ed States Ban	kruptcy Court for the:	Northern District of Illinois	lacksquare	
Case (# kn	number				
L					Check if this is an
Offi	cial Fo	rm 106H			amended filing
	 	·····	r Codebtors		
					12/15
and n	umber the e		es on the left. Attach the Additi		s complete and accurate as possible. If two married people nore space is needed, copy the Additional Page, fill it out, e. On the top of any Additional Pages, write your name and
1. De	o you have No	any codebtors? (lf you are filing a joint case, do n	ot list either spouse as	a codebtor.)
	Yes				
2. W	lithin the la rizona, Calif	st 8 years, have y omia, Idaho, Louis	ou lived in a community prope siana, Nevada, New Mexico, Pue	rty state or territory? rto Rico, Texas, Washir	(Community property states and territories include
	No. Go to	line 3.			igion, and vrisconsin,)
	Yes. Did y	our spouse, forme	r spouse, or legal equivalent live	with you at the time?	
	☐ No				
	Yes. II	n which community	state or territory did you live?		fill in the name and current address of that person.
					,
	Name o	of your spouse, former sp	oouse, or legal equivalent		
	Number	Street			
	City		State	730.0	
2 tm.		C-1 - D - 6		ZIP Code	
Sc	:hedule D (0	2 ayam as a cod Official Form 1061	ebtor only if that person is a gi	uarantor or cosigner. I	your spouse is filing with you. List the person Make sure you have listed the creditor on G (Official Form 106G). Use Schedule D,
c	Column 1: Ye	our codebtor			Column 2: The creditor to whom you owe the debt
					Check all schedules that apply:
3.1					Cohodula D. Sin-
F	Name				☐ Schedule D, line ☐ Schedule E/F, line ☐
P	Number	Street			☐ Schedule G, line
	City		State	ZIP Code	
3.2				Zn Obde	
<u></u>	Vame				Schedule D, line
-	lumber	Street			☐ Schedule E/F, line
,	winder	Street			☐ Schedule G, line
ā	Sity		State	ZIP Code	
5.3					D. Calcada to D. Da
N	lame				Schodule D, line
Ñ	lumber (Street			Schedule E/F, line
7	ity		- Charles		Conclude O, into
v			State	ZIP Code	

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Fill in this information to identify		ument Pa	age 31 of	49				
Debtor 1 Vanessa First Name	White Middle Name	Last Name						
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name						
United States Bankruptcy Court for the:	Northern District of Illinois	[
Case number (If known)		va		Check if	this is:			
					mended filing			
					oplement showing pos ne as of the following			
Official Form 106I					DD / YYYY			
Schedule I: You	ur income					12/15		
Be as complete and accurate as p supplying correct information. If y if you are separated and your spore separate sheet to this form. On the Part 1: Describe Employn	od are married and not to use is not filing with you e top of any additional pa	lling jointly, and :	your spouse	is living with	you, include informati	on about your spouse.		
Fill in your employment information.		Debtor 1	Debtor 1			Debtor 2 or non-filing spouse		
If you have more than one job, attach a separate page with information about additional employers.	Employment status	✓ Employed☐ Not employed		Employed Not employed				
Include part-time, seasonal, or self-employed work.								
Occupation may include student or homemaker, if it applies.	Occupation	Director						
	Employer's name	Empl. & Em	pl. Services	Inc				
	Employer's address	208 S LaSa	lle Street					
		Number Stree Suite 1628	t		Number Street			
		Chicago	IL 6060	4				
		City		Code	City	State ZIP Code		
	How long employed the	re? 7	option.		7			
Part 2: Give Details About	Monthly Income							
Estimate monthly income as of spouse unless you are separated.						-		
If you or your non-filing spouse hat below. If you need more space, at	ve more than one employe tach a separate sheet to th	r, combine the inf is form.	formation for a	Il employers fo	or that person on the line	es:		
			Foi	Debtor 1	For Debtor 2 or non-filing spouse			
 List monthly gross wages, sala deductions). If not paid monthly, or 	rry, and commissions (be calculate what the monthly	fore all payroll wage would be.	2. \$	5,094.00	\$			
3. Estimate and list monthly overt	time pay.		3. ±\$	0.00	+ ¢			

3. +\$

4.

5,094.00

4. Calculate gross income. Add line 2 + line 3.

Case 16-09201 Doc 1 Filed 03/17/16 Entered 03/17/16 11:47:50 Desc Main Document Page 32 of 49 Vanessa Debtor 1 Case number (if known) First Name Middle Name For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here 5,094.00 5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 738.00 5a. 5b. Mandatory contributions for retirement plans 260.00 5b. 5c. Voluntary contributions for retirement plans 5c. 0.005d. Required repayments of retirement fund loans 0.00 5d. 5e. Insurance 60.00 5e. 5f. Domestic support obligations 0.00 5f. 0.00 5g. Union dues 5g. 5h. Other deductions. Specify: 5h. 0.006. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h. 6. 0.007. Calculate total monthly take-home pay. Subtract line 6 from line 4. 1,058.00 7. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 0.00 8a. 8b. Interest and dividends 0.00 8b 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce 0.00 settlement, and property settlement. 8c. 8d. Unemployment compensation 0.00 8d. 8e. Social Security ۸e 0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 0.00 8f. 8g. Pension or retirement income 0.00 8g. 8h. Other monthly income, Specify: 8h. 0.00 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. 0.00 9 4.036.00 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 4,036.00 10

10. Calculate monthly income. Add line 7 + line 9. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. 11. 🛧 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies 12. Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? 4

No.	
Yes. Explain:	
ies. Explain.	

0.00

4,036.00

Fill in this information to identify	y your case:			
Debtor 1 Vanessa	White		a	
Debtor 2	Middle Name Last Name	Check if		
(Spouse, if filing) First Name	Middle Name Last Name		nended filing	
United States Bankruptcy Court for the:	Northern District of Illinois	exper	plement showing pos	dpetition chapter 13 g date:
Case number (If known)		MM / I	DD / YYYY	•
Official Form 106J				
Schedule J: Yo	ur Expenses			12/15
Be as complete and accurate as p information. If more space is need (if known). Answer every question	ossible. If two married people are filed, attach another sheet to this form	ing together, both are equalty n. On the top of any additional	responsible for supply pages, write your nan	ying correct ne and case number
Part (R Describe Your Hou	ısehold			
1. Is this a joint case?				
✓ No. Go to line 2.✓ Yes. Does Debtor 2 live in a s	separate household?			
☐ No	e Official Form 106J-2, Expenses for S	Separate Household of Debtor 2.		
2. Do you have dependents?	□ No			
Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Do not state the dependents' names.	,	Son	16	☐ No ☑ Yes
		Daughter	13	☐ No ☑ Yes
		Daughter	10	☐ No ☑ Yes
				□ No
				☐ Yes
				☐ No ☐ Yes
3. Do your expenses include expenses of people other than yourself and your dependents?	☑ No ☐ Yes			
Estimate Your Ongoin	ng Monthly Expenses			
Estimate your expenses as of your	bankruptcy filing date unless you a	re using this form as a supple	ment in a Chapter 13 c	ase to report
expenses as of a date after the bank applicable date.	ruptcy is filed. If this is a suppleme	ntal Schedule J, check the bo	x at the top of the form	and fill in the
include expenses paid for with non- such assistance and have included	cash government assistance if you it on Schedule I: Your Income (Offic	know the value of	V	
	rpenses for your residence. Include		Your exper	ises
any rent for the ground or lot.	rpenses for your residence. Include	irst mortgage payments and	4. \$	1,090.00
If not included in line 4:				
4a. Real estate taxes	useus turi		4a. \$	0.00
4b. Property, homeowner's, or re			4b. \$	22.00
4c. Home maintenance, repair, a			4c. \$	230.00
 4d. Homeowner's association or 	condominium dues		4d \$	0.00

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I	Debto	Case number as	nawal		
		First Name Middle Name Last Name Case number (if k	iown)		·
				Your e	xpenses
	5. A c	ditional mortgage payments for your residence, such as home equity loans	5.	\$	0.00
€	s. Ut	ilities:			
	6a	Electricity, heat, natural gas	6a.	\$	210.00
	6b	Water, sewer, garbage collection	6b.	* · · · · · · · · · · · · · · · · · · ·	0.00
	6c	Telephone, cell phone, Internet, satellite, and cable services	6c.	_	
	6d	Other. Specify:	6d.		0.00
7	. Fo	od and housekeeping supplies	7.	\$	700.00
8	. Ch	ildcare and children's education costs	8.	¢	
9	. Cle	othing, laundry, and dry cleaning	9.	\$	
10.	Pe	rsonal care products and services	10.	\$ \$	
11.	Me	dical and dental expenses	11,		00.00
12.	Tra Do	nsportation. Include gas, maintenance, bus or train fare. not include car payments.		\$	330.00
13.		ertainment, clubs, recreation, newspapers, magazines, and books	12.		100.00
14.		aritable contributions and religious donations	13.	\$	40.00
15.	ins	urance. not include insurance deducted from your pay or included in lines 4 or 20.	14.	\$	40.00
		Life insurance		A	0.00
	15b	Health insurance	15a.	-	0.00
	15c.	Vehicle insurance	15b.		
	15d.	Other insurance. Specify:	15c.	-	0.00
16			15d.	Φ	0,00
16.	Spe	es. Do not include taxes deducted from your pay or included in lines 4 or 20. cify:			0.00
			16.	\$	0.00
17.		allment or lease payments:			
		Car payments for Vehicle 1	17a.	\$	401.00
		Car payments for Vehicle 2	17b.	\$	
		Other. Specify:	17c.	\$	0.00
	17d.	Other, Specify:	17d.	\$	0.00
18.	You	payments of alimony, maintenance, and support that you did not report as deducted from pay on line 5, Schedule I, Your Income (Official Form 106I).			
		·	18.	\$	0.00
		r payments you make to support others who do not live with you,			
	Spec	ify:	19.	\$	0.00
20.	Othe	r real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income			
		Mortgages on other property	20a.	\$	0.00
	20b.	Real estate taxes	20b.	\$	
	20c.	Property, homeowner's, or renter's insurance	20c.	\$	
	20d.	Maintenance, repair, and upkeep expenses	20d.	\$	2.22
	20e.	Homeowner's association or condominium dues	200	\$	

Entered 03/17/16 11:47:50 Desc Main Case 16-09201 Doc 1 Filed 03/17/16 Page 35 of 49 Document Vanessa Debtor 1 White Case number (#known)_ Last Name Other. Specify: 0.00 Calculate your monthly expenses. 22a. Add lines 4 through 21. 3,708.00 22a. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22b. 0.00 22c. Add line 22a and 22b. The result is your monthly expenses. 3,708.00 22c. 23. Calculate your monthly net income. 4,036.00 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. 23b. Copy your monthly expenses from line 22c above. 3,708.00 23c. Subtract your monthly expenses from your monthly income. 328.00 The result is your monthly net income. 23c. 24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☑ No. ☐ Yes.

Explain here:

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	Document	. Pao	Je 36 01 49	
Il in this information to identify your case:				
ebtor 1 Vanessa	White			
First Name Middle Name	Last Name		-	
pouse, if filing) First Name Middle Name	Last Name			
nited States Bankruptcy Court for the: Northern District o	f Illinois	-		
ase number known)		-		
·				☐ Check if this is
				amended filing
Official Form 106Dec				
Declaration About an	Individu	ial D	ebtor's Schedu	les 12/15
f two married people are filing together, both are	equally reenoneib	le for supr	lying correct information	
ou must file this form whenever you file bankru	ion with a bankaunt	menueu s	chedules, making a raise stateme	ent, concealing property, or
years, or both. 18 U.S.C. §§ 152, 1341, 1519, and	3571.	oy base co	in result in files up to \$250,000, t	or imprisonment for up to 20
, - , - , - , - , - , - , - , - , - , -				
Sign Below				
Did you pay or agree to pay someone who is t	NOT an attorney to	help vou f	ill out bankruntcy forms?	
☐ No			is out builting toy lossing;	
Yes. Name of person Cecil Davis			Attach Bankruptcy Petition Preparer's No	ofice Declaration and
			Signature (Official Form 119).	ouce, Declaration, and
		·	signaturo (Ontotas i Onto 110).	
Under penalty of perjury, I declare that I have a that they are true and correct.	read the summary a	and sched	ales filed with this declaration an	d
that they are true alto correct,				
× / - / Ll	×			
Signature of Debtor 1	· · · · · · · · · · · · · · · · · · ·	_fD =		
_	Signature	of Debtor 2		
Date 3 - 17 - 16	ν			
	Date			

	Case 16-0920	1 Doc 1	iled 03/17/16 Document	Entere Page 3	ed 03/17/16 7 of 49	5 11:47:50	Desc Main	A CONTRACTOR OF THE CONTRACTOR
Fill in this	information to identify							
Debtor 1	Vanessa First Name	Middle Name	White Last Name			****		
Debtor 2 (Spouse, if fili	ng) First Name	Middle Name	Last Name					
	es Bankruptcy Court for the:			F				
Case numbe	er		****	<u> </u>			D obser	Fa id alling in the
(ii kilotti)			**************************************]			k if this is an ided filing
Official	Form 107							
Stater	nent of Final	ncial Affai	rs for Indiv	/iduals	Filing f	or Bankr	uptcy	12/15
number (if) Part 1:	. If more space is need known). Answer every of Give Details About	uestion.				onal pages, will	te your name and	Case
1. What is	your current marital st	atus?						
□ Mar		atus :						
	married							
☑ No ☐ Yes	the last 3 years, have y List all of the places you ebtor 1:							es Debtor 2 I there
				Same a	s Debtor 1		☐ sa	ime as Debtor 1
 3.1	lumber Street		From	-		****	Fr	om
14	umber Street		То	Number	r Street		To	
••••			<u>.</u>				Market of a self-of-holocomers	
č	ity	State ZIP Code		City		State ZIP Cod	de	
				Same a	s Debtor 1		🖸 Sa	me as Debtor 1
N	umber Street		From	Number	Street		Fr	om
			To				Tc	
C	ity	State 71D Code						
		State ZIP Code		City		State ZIP 0		
states a	t <mark>he last 8 years, did yo</mark> u <i>nd territories</i> include Ariz	ever live with a sp ona, California, Idal	p <mark>ouse or legal equiv</mark> no, Louisiana, Nevad	valent in a c da, New Mex	ommunity prop	erty state or ter , Texas, Washing	ritory? (Communi	y property n.)
☑ No	Afelia suns usus 50 sust 0	tala a						·
سا Yes.	. Make sure you fill out So	cneaule H: Your Co	debtors (Official Forr	m 106H).				
Part 2:	explain the Sources o	of Your Income						
				,				

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Page 38 of 49 Document Vanessa White Debtor 1 Case number (# km) First Name 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. ☐ No Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income Gross income Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) Wages, commissions, ■ Wages, commissions, From January 1 of current year until 12,580.00 bonuses, tips the date you filed for bankruptcy: bonuses, tips Operating a business Operating a business Wages, commissions, ■ Wages, commissions, For last calendar year: 61,128.00 bonuses, tips bonuses, tips (January 1 to December 31,2015 Operating a business Operating a business Wages, commissions, For the calendar year before that: Wages, commissions. bonuses, tips bonuses, tips 60,253.00 (January 1 to December 31, 2014 Operating a business Operating a business 5. Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. M No Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income Gross income from each source Describe below. Describe below, each source (before deductions and (before deductions and exclusions) exclusions) From January 1 of current year until the date you filed for bankruptcy:

For last calendar year:

(January 1 to December 31,2015

For the calendar year before that: (January 1 to December 31,2014

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Debtor 1

Vanessa First Name

Middle Name

White

Case number (if known)_

art 3:	List Certain Payme	nts You I	Made Befo	re You File	d for Bankruptcy		
Are eith	ner Debtor 1's or Debto	r 2's debts	primarily o	consumer del	bts?		
☐ No.	Neither Debtor 1 nor I	Debtor 2 ha	as primarily / for a perso	/ consumer d	lebts. Consumer debts a	are defined in 11 U.S.C. § 10	01(8) as
	During the 90 days before	ore you file	d for bankru	ptcy, did you	pay any creditor a total c	of \$6.225* or more?	
	☐ No. Go to line 7.					Toland Of High	
	Yes. List below eac total amount ye	uu paiu ilia	t creditor. Li	O noi include i	f \$6,225* or more in one payments for domestic s ments to an attorney for	or more payments and the upport obligations, such as	
	* Subject to adjustment	on 4/01/16	and every	3 vears after t	hat for cases filed on or	after the date of adjustment.	
Z Yes	Debtor 1 or Debtor 2 o					unto the date of adjustment.	
100.	During the 90 days before						
		no you moe	i ioi bankiuj	ртсу, ака уод р	ay any creditor a total of	1 \$600 or more?	
	No. Go to line 7.						
	orcanor. Do no	t illicitude pa	willenus for	DOMESTIC SUN	\$600 or more and the to port obligations, such as ey for this bankruptcy ca	otal amount you paid that child support and use.	
				Dates of payment	Total amount paid	Amount you still owe	Was this payment for.
					\$	\$	
	Creditor's Name		· · · · · · · · · · · · · · · · · · ·		¥	D	☐ Mortgage
	Number Street						☐ Car
	Number Street						Credit card
							Loan repayment
							Suppliers or vendors
	City	State	ZIP Code				Other
	Creditor's Name			**************************************	\$	\$	☐ Mortgage
							Car
	Number Street						Credit card
							Loan repayment
							Suppliers or vendors
	City S	State	ZIP Code				Other
					\$	Φ	_
	Creditor's Name			****	Ψ	\$	Mortgage
							☐ Car
	Number Street						Credit card
	***************************************						Loan repayment
							☐ Suppliers or vendors
	City Si	iale	ZIP Code				Other

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	Vanessa	White	
Debtor 1	A CILICAGE	AALUIG	Coop pyroban in
	Circl Massa	L. N.	Case number (if known)

agent, including one for a such as child support and	business you operate as a	sole proprietor.	11 U.S.C. § 101. I	nclude payments fo	securities; and any managing r domestic support obligations,
☑ No	amnony.				
Yes. List all payments	to an insider.				
		Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
			\$	\$	
Insider's Name			V		
Number Street					
City	State ZIP Code				
Insider's Name		West of the state	\$	\$	
Number Street					
City	0: 1 7:0 0	-			
thin 1 year before you f	State ZIP Code Filed for bankruptcy, did y	ou make any p	avments or trans	fer any property o	n account of a debt that bene
i insider?	filed for bankruptcy, did y guaranteed or cosigned by		ayments or trans	fer any property o	n account of a debt that benef
insider? clude payments on debts No	filed for bankruptcy, did y guaranteed or cosigned by		ayments or trans Total amount paid	fer any property o Amount you still owe	n account of a debt that benef Reason for this payment Include creditor's name
insider? clude payments on debts	filed for bankruptcy, did y guaranteed or cosigned by	y an insider. Dates of	Total amount	Amount you still	Reason for this payment
insider? clude payments on debts No Yes. List all payments t	filed for bankruptcy, did y guaranteed or cosigned by	y an insider. Dates of	Total amount paid	Amount you still owe	Reason for this payment
Insider? Ilude payments on debts No Yes. List all payments t	filed for bankruptcy, did y guaranteed or cosigned by	y an insider. Dates of	Total amount paid	Amount you still owe	Reason for this payment
Insider? Ilude payments on debts No Yes. List all payments t	filed for bankruptcy, did y guaranteed or cosigned by	y an insider. Dates of	Total amount paid	Amount you still owe	Reason for this payment
Insider? Iude payments on debts No Yes. List all payments t Insider's Name Number Street	filed for bankruptcy, did y guaranteed or cosigned by hat benefited an insider.	y an insider. Dates of	Total amount paid	Amount you still owe	Reason for this payment
Insider? Iude payments on debts No Yes. List all payments t Insider's Name Number Street City	filed for bankruptcy, did y guaranteed or cosigned by hat benefited an insider.	y an insider. Dates of	Total amount paid	Amount you still owe	Reason for this payment
Insider's No Yes. List all payments t Insider's Name Number Street City Insider's Name	filed for bankruptcy, did y guaranteed or cosigned by hat benefited an insider.	y an insider. Dates of	Total amount paid	Amount you still owe	Reason for this payment

8.

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1	Vanessa First Name Middle Name La	White sat Name	Case number (if to	iown)	
t 4:	Identify Legal Actions, Repo				
ist all	1 year before you filed for bankru such matters, including personal injuntract disputes.	ptcy, were you a party in ar Iry cases, small claims action	ny lawsuit, court action, or ad ns, divorces, collection suits, pa	ministrative proceed ternity actions, suppo	ling? rt or custody modifica
No					
Yes	s. Fill in the details.				
		Nature of the case	Court or agency		Status of the cas
	ose title Chapter 7 Bankruptcy	Bankruptcy	Illinois Federal (Court Central	
Cá	ase title Onapter 7 Dankruptcy	*****	Court Name		— Pending
			219 S Dearborn		On appeal
	se number 1427470		Number Street		Concluded
Cε	ise number		Chicago city s	IL 60606 State ZIP Code	
			્રાપુ	oute air vue	
Co	se tille				- Pending
Ce	se tille		Court Name		On appeal
			Number Street		Concluded Concluded
C a	se number		Humber Street		Concluded
-	ou names		City	tate ZIP Code	*****
	. Fill in the information below.	Describe the pro	norty.	But	M
		beautible tile pro	percy	Date	Value of the property
	Creditor's Name				\$
	Number Street	Explain what hap	ppened		
		-	• • • • •		
			as repossessed. as foreclosed.		
		—	as garnished.		
	City State ZIP C		as attached, seized, or levied.		
		Describe the pro	perty	Date	Value of the proper
	Creditor's Name	**************************************			\$
	Number Street				
		Explain what hap	pened		
		Property wa	as repossessed.		
			s foreclosed.		
	City State ZIP C		is garnished.		
			is attached, seized, or levied.		

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Case number (if known)_

White

Vanessa

Middle Name

First Name

Debtor 1

counts or refuse to	• • •			
Yes. Fill in the detail	s.			
		Describe the action the creditor took	Date action	A
Creditor's Name			was taken	Amount
Number Street			THE PARTY OF THE P	\$
City	State ZIP Code	Last 4 digits of account number: XXXX		
		and a decount Hamber.	-	
hin 1 year before yo	u filed for bankrup	otcy, was any of your property in the possession o	of an assignee for the benefi	it of
aitors, a court-appo No	inted receiver, a cu	ustodian, or another official?		
Yes				
: List Certain G	ifts and Contrib	utions		
nin 2 years before yo	ou filed for bankru	ptcy, did you give any gifts with a total value of m	ore than \$600 per person?	
No		ptcy, did you give any gifts with a total value of m	ore than \$600 per person?	
No Yes. Fill in the details		ptcy, did you give any gifts with a total value of m	ore than \$600 per person?	
No	for each gift.	ptcy, did you give any gifts with a total value of m Describe the gifts	ore than \$600 per person? Dates you gave the gifts	Value
No Yes. Fill in the details Gifts with a total value per person	for each gift.		Dates you gave	Value ¢
No Yes. Fill in the details Gifts with a total value per person	for each gift.		Dates you gave	Value \$
No Yes. Fill in the details Gifts with a total value per person	for each gift.		Dates you gave	V alue \$ \$
No Yes. Fill in the details Gifts with a total value per person Person to Whom You Gave to	for each gift.		Dates you gave	\$
No Yes. Fill in the details Gifts with a total value per person Person to Whom You Gave to	for each gift.		Dates you gave	\$
No Yes. Fill in the details Gifts with a total value per person Person to Whom You Gave to	for each gift.		Dates you gave	\$
No Yes. Fill in the details Gifts with a total value per person Person to Whom You Gave to Number Street	for each gift. e of more than \$600 the Gift State ZIP Code		Dates you gave	\$
No Yes. Fill in the details Gifts with a total value per person Person to Whom You Gave to Number Street	for each gift. e of more than \$600 the Gift State ZIP Code		Dates you gave	\$
No Yes. Fill in the details Gifts with a total value per person Person to Whom You Gave to Sity Person's relationship to y Gifts with a total value of	for each gift. e of more than \$600 the Gift State ZIP Code		Dates you gave	\$
No Yes. Fill in the details Gifts with a total value per person Person to Whom You Gave to Jumber Street Street Street Street value of the street of th	s for each gift. e of more than \$600 the Gift State ZIP Code rou of more than \$600	Describe the gifts	Dates you gave the gifts Dates you gave	\$ \$
No Yes. Fill in the details Gifts with a total value per person Person to Whom You Gave to Sity Person's relationship to y Sifts with a total value over person	s for each gift. e of more than \$600 the Gift State ZIP Code rou of more than \$600	Describe the gifts	Dates you gave the gifts Dates you gave	\$ \$
Yes. Fill in the details Gifts with a total value per person Person to Whom You Gave to lumber Street ity erson's relationship to y sifts with a total value of the person	s for each gift. e of more than \$600 the Gift State ZIP Code rou of more than \$600	Describe the gifts	Dates you gave the gifts Dates you gave	\$ \$
No Yes. Fill in the details Gifts with a total value per person Person to Whom You Gave to Jumber Street Street Street Street value of the street of th	s for each gift. e of more than \$600 the Gift State ZIP Code rou of more than \$600	Describe the gifts	Dates you gave the gifts Dates you gave	\$Value
No Yes. Fill in the details Gifts with a total value per person Person to Whom You Gave to	s for each gift. e of more than \$600 the Gift State ZIP Code rou of more than \$600	Describe the gifts	Dates you gave the gifts Dates you gave	\$Value

Case 16-09201 Doc 1 Filed 03/17/16 Entered 03/17/16 11:47:50 Document Page 43 of 49 Vanessa White Debtor 1 Case number (# known) First Name 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? ☑ No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities Describe what you contributed Date you Value that total more than \$600 contributed Charity's Name Street Number City State ZIP Code Part 6: **List Certain Losses** 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? M No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: **List Certain Payments or Transfers** 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. **1** No Yes. Fill in the details. Description and value of any property transferred Date payment or Amount of payment transfer was Person Who Was Paid made Number Street

City

Email or website address

Person Who Made the Payment, if Not You

ZIP Code

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ebtor 1	Vanessa		White	Case number (if known)		
	First Name	Middle Name La	est Name	Odde Hulling (If known)		
			Description and value of any	property transferred	Date payment or	Amount of
					transfer was made	payment
	Person Who Was Pai	d	New York			
	Number Street					\$
						\$
			-		***************************************	T
	City	State ZIP Code	···			
	Email or website addre	ess				
	Person Who Made the	Payment, if Not You				
. With	in 1 year before	you filed for bankrup	otcv, did vou or anvone else a	cting on your behalf pay or trans	efor any proporty (o amuana wha
biot	nisea to neib yot	i deal with your cred	itors or to make payments to	your creditors?	sier any property i	o anyone who
		yment or transfer that	you listed on line 16.			
		-				
U \	es. Fill in the deta	ails.				
			Description and value of any p	property transferred	Date payment or transfer was	Amount of payme
	Person Who Was Paid]	_		made	
	Number Street				<u> </u>	\$
	7000		-			\$
	City	State ZiP Code	<u>.</u>			Ψ
With	in 2 years before	you filed for bankru	ptcy, did you sell, trade, or otl	nerwise transfer any property to	anvone other tha	n nronerty
uans	nerrea in the ora	inary course of your	business or financial affairs?	•		
DOM	ot include girts and	ansiers and transiers i d transfers that you ha	made as security (such as the g we already listed on this stateme	ranting of a security interest or mo	ortgage on your prop	perty).
Y N	o			7. N		
⊔ Y	es. Fill in the deta	ils.				
			Description and value of propertransferred		r payments received	Date transfer
ī	Person Who Received 1	Emperer	ti ali si eri eq	or debts paid in exchang	je	was made
	CISCII WHO NECESTED	lanster				
ī	Number Street					************
-						
ī	City	State ZIP Code				
	-					
F	Person's relationship	to you				
Ē	erson Who Received T					
•	erson who received I	ranst e r				
7	lumber Street					-
-						
õ	ity	State ZIP Code				

Person's relationship to you ____

Entered 03/17/16 11:47:50 Case 16-09201 Doc 1 Filed 03/17/16 Desc Main Document Page 45 of 49 Debtor 1 Vanessa White Case number (# known) First Name Middle Name 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) ☑ No Yes. Fill in the details. Description and value of the property transferred Date transfer was made Name of trust Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. M No Yes. Fill in the details. Last 4 digits of account number Type of account or Date account was Last balance before instrument closed, sold, moved, closing or transfer or transferred Name of Financial Institution XXXX-Checking Savings Number Street ☐ Money market ☐ Brokerage City State ZIP Code Other ☐ Checking XXXX-Name of Financial Institution ☐ Savings Number Street ☐ Money market ☐ Brokerage Other_ State ZIP Code 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? M No Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? ☐ No

you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for urities, cash, or other valuables?

No
Yes. Fill in the details.

Who else had access to it?

Describe the contents

Do you still have it?

No
Name

Name

Number Street

City State ZIP Code

Case 16-09201 Doc 1 Filed 03/17/16 Entered 03/17/16 11:47:50 Desc Main Document Page 46 of 49 Vanessa White Debtor 1 Case number (if kno First Name 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Who else has or had access to it? Describe the contents Do you still have it? ☐ No Name of Storage Facility Name ☐ Yes Number Street Number Street City State ZIP Code City State ZIP Code identify Property You Hold or Control for Someone Eise Part 9: 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. 四 No Yes. Fill in the details. Where is the property? Describe the property Value Owner's Name Number Street Number Street City ZIP Code City State ZIP Code Part 10: Give Details About Environmental information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

	•		1441 1441 1
No Yes. Fill in the details.			
	Governmental unit	Environmental law, if you know it	Date of notice
Name of site	Governmental unit		-
Number Street	Number Street		
	City State ZIP Code		
City State ZIP Code			

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Debtor 1	Vanessa First Name	Middle Name La	White	Case number (#known)	
	t hat tastle	mittile Name La	st Name		
25 Ha	ve vou notified a				
	No	iy governmental unit	of any release of hazardous materi	al?	
	No Yes. Fill in the d	-4			
	res. Fill III (lie Q	etalis.	6		
			Governmental unit	Environmental law, if you know it	Date of notice
	Name of site		Governmental unit		
	Number Street		Number Street		
	***************************************		City State ZIP Code		
	City	State ZIP Code	-		
	•				
26. Hav	e you been a part	ty in any judicial or ac	lministrative proceeding under any	environmental law? Include settlements an	d orders.
B	No				
L.	Yes. Fill in the de	tails.			
			Court or agency	Nature of the case	Status of the case
	Case title				Case
			Court Name	-	Pending
					On appeal
			Number Street		☐ Concluded
	Case number		-		
			City State ZIP Code	,	
Part 1	1 Give Deta	ils About Your Bu	iness or Connections to Any I	Rusinese	
27. With				ve any of the following connections to any b	
	A sole proprie	tor or self-employed	in a trade, profession, or other acti	vity, either full-time or part-time	usiness?
	A member of a	i limited liability comp	pany (LLC) or limited liability partne	ership (LLP)	
	A partner in a	partnership			
_			ecutive of a corporation		
			g or equity securities of a corporat	ion	
	No. None of the at	ove applies. Go to Pa	art 12,		
LL 1	res. Check all tha	t apply above and fill	in the details below for each busin	ess.	
			Describe the nature of the business	Employer Identification number	
	Business Name			Do not include Social Security	number or ITIN.
	Number Street			EIN:	
	oumber Street		Name of accountant or bookkeeper	Dates business existed	
			and an analysis of the second	pares prismess existed	
				From To	
	City	State ZIP Code			<u> </u>
			Describe the nature of the business	Employer Identification number	
	Business Name			Do not include Social Security	number or ITIN.
				EIN:	

Name of accountant or bookkeeper

City

State

ZIP Code

Dates business existed

____ То ___

From _

Case 16-09201 Doc 1 Filed 03/17/16 Entered 03/17/16 11:47:50 Document Page 48 of 49 Vanessa White Debtor 1 Case number (#known) First Name Middle Name **Employer Identification number** Describe the nature of the business Do not include Social Security number or ITIN. Business Name Number Street Name of accountant or bookkeeper Dates business existed From _____ To ____ State ZIP Code 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. ☑ No Yes. Fill in the details below. Date issued Name MM / DD / YYYY Number Street Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 1 Signature of Debtor 2

VANESSA WHITE

LIST OF CREDITORS

AD ASTRA RECOVERY SERVIC 3611 N RIDGE R 104 WICHITA, KS 67205 (866) 398-2085

City of Chicago Finance Department 121 N. LaSalle Street 7th Floor Chicago, IL 60602 Phone: 312.744.2204

Illinois Tollway 2700 Ogden Ave Downers Grove, IL 60515

MCSI INC PO BOX 327 PALOS HEIGHTS, IL 60463 (708) 613-2062

MERCHANTS CREDIT GUIDE 223 W JACKSON ST 900 CHICAGO, IL 60606 (888) 249-3811

PRESTIGE FINANCIAL 1420 S 500 W SALT LAKE CITY, UT 84115 (801) 844-2100

ZINGO CASH ILLINOIS PO BOX 5601 VERNON HILLS, IL 60061 (888) 946-4655

Va Whin 3-17-16